

UNITED STATES HOUSE OF REPRESENTATIVESFORM B
For New Members, Candidates, and New Employees

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FINANCIAL DISCLOSURE STATEMENT

LEGISLATIVE RESOURCE CENTER

Name: Dr. Joshua Williams

Daytime Telephone

FILER STATUS	<input checked="" type="checkbox"/> New Member or Candidate for U.S. House of Representatives	State: <u>TN</u>
	<input type="checkbox"/> Candidate	District: <u>2</u>
Data of Election: <u>8-2-2018</u>		
		<input type="checkbox"/> Check if Amendment
New Officer or Employee		Staff Filer Type (if Applicable):
Employing Office:		<input type="checkbox"/> Shared <input type="checkbox"/> Principal Assistant to _____

U.S. House of Representatives
Office Use Only

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

- A. Did you, your spouse, or your dependent child:
 a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period?
 b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?
- C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period? Yes No
- D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? Yes No
- E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? Yes No
- F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? Yes No
- J. Did you receive compensation of more than \$5,000 from a single source in the current year and like prior years? Yes No

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"**THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE****EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS**

TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?

EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

Yes No

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Dr. JOSHUA WILLIAMS.

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Use additional sheets if more space is required.

SCHEDULE C – EARNED INCOME

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and Associates is established as shown in the "Senate Staff Salary and Wage Schedules" (see Senate Document No. 2, 114th Congress, 2nd Session, p. 277-282). The 2018 limit is \$70,000. In addition, certain types of income, including honoraria, fees and remuneration for

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria)	Type	Amount	
		Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (Aug 15)	Honorarium	\$0	\$500
State of Maryland	Salary	\$20,000	\$18,000
Civil War Roundtable (Oct. 2)	Speaker's Speech	\$0	\$1,000
Orange County Board of Education	Speaker's Salary	NA	NA
Williams Psychological Corp	Salary	32,175. 00	14,500
Williams Psychological Corp	spouse salary	21,250. 00	15,000
Williams Psychological Corp	Flow through Corp Income	24,600. 00	54,913. 00
Williams Psychological Corp	Flow through Chapter 5 Corp	23,490. 00	54,913. 00

Use additional sheets if more space is required.

SCHEDULE D – LIABILITIES

Name: DR. JOSHUA WILLIAMS

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period. **New Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000.

*Column K is for liabilities held solely by your spouse or dependent child.

SP/JT	Creditor	Date Incurred MO/YR	Type of Liability	Amount of Liability									
				A	B	C	D	E	F	G	H	I	J
	Fleet Bank of Wilmington, DE	BBB	Mortgage on Rental Property, Dover, DE		\$10,001-\$15,000								
	<u>V-12 Federal Credit Union</u>	<u>2003</u>	<u>Mortgage</u>	X	\$15,001-\$50,000								
					\$50,001-\$100,000								
					\$100,001-\$250,000								
					\$250,001-\$500,000								
					\$500,001-\$1,000,000								
					\$1,000,001-\$2,000,000								
					\$2,000,001-\$25,000,000								
					\$25,000,001-\$50,000,000								
					Over \$50,000,000								
					Over \$1,000,000* (Spouse/DC Liability)								

SCHEDULE E – POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude:** Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. **New Members** and **second-year candidates** report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Officer	Williams Psychological Corporation

Use additional sheets if more space is required.